SUMMARY SHEET

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1		· · · · · · · · · · · · · · · · · · ·	
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damage		
٠.	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine	\$314,318	+2.5%
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	Line of Insurance s filing only apply to certain so, specify: No	territory (territories)or	certain classes?

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Rate revision for Pet Insurance. See attached Actuarial Memo for detailed explanation.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

An	nerican	Alternative	Insurance	Corporation	
		Name of	Company		
		Style). Wold.	- Vice President	
		Official	l - Title		

Cha	ange in Company's premium or rate le	vel produced by rate revision effective	10/1/2013
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine	5057	-47.80%
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
D	as filing and combute contain territory	territories) or certain classes? If so, specify:	No.
DO	es filing only apply to certain territory (territories) or certain classes? If so, specify.	NO.
Brie	ef description of filing. (If filing follows	rates of an advisory organization, specify orga	nization):
	oting ISO Loss Costs		
	justed to reflect all prior rate changes		
**C	hange in Company's premium level w	hich will result from application of new rates.	
		AmTrust Insurance Company	
		Na	me of Company
			.
			ance Manager- Rates & Forms
			Official – Title

Change in Company's premium or rate level produced by rate revision effective		10/1/2013	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
11. 12. 13. 14.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Line of Insurance	5057	-4.20%
Doe	es filing only apply to certain territory (erritories) or certain classes? If so, specify	y: <u>No.</u>
	ef description of filing. (If filing follows ising Company LCM to 1.520	rates of an advisory organization, specify o	
	justed to reflect all prior rate changes. hange in Company's premium level w	hich will result from application of new rate	es.
		AmTrust Insurance Comp	pany of Kansas, Inc. Name of Company
		Howard Montgomery, Cor	mpliance Manager- Rates & Forms

SUMMARY SHEET

	Change in Company's premium or rate	e level produced by rate revision effect	September 1, 2013
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
•	Commercial		
3.	Liability Other Than Auto		
4. 5	Burglary and Theft		
5.	Glass		
6. 7.	Fidelity Surety		
7. 8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine	42647	-0.13%
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (te	rritories) or certain classes? If so, spe	ecify:
Intro provi •Rev feet i \$1,00 Revi Intro	description of filing. (If filing follows ducing Central Mutual Summit® Boat des a group of additional coverages for ising Personal Watercraft under DEBI in length. Emergency Service – Expand 10. Introducing Boating Equipment – In sing Liability – Base Premiums (per beducing Uninsured Boater rates ducing Agreed Value Settlement Provi	er rule. Central Mutual Summit® Bo or an additional \$25 annual charge. TS. We will only be surcharging Jet led Coverage will now only include lincreased Limits, Introducing Persona oat). We will now have separate rate.	Propelled Boats that are less than 16 imit options of \$500 and 1 Effects Coverage
		_	
		_(Central Mutual Ins Co
TT0010	D		Name of Company
H2919	U	(Mrs.) Petrise Meyer
			Sr Rates and Forms Analyst
		-	Official - Title

Cha	ange in Company's premium or rate le	vel produced by rate revision effective 10	0/1/2013
	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
_	Passenger Commercial		
2.	Automobile Physical Damage		
3.	Private Passenger Commercial Liability Other Than Auto		
3. 4.	Burglary and Theft		
4 . 5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
	Inland Marine	46576	-47.80%
12.	Homeowners		
13.	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
Dod	os filing only apply to certain territory (territories) or certain classes? If so, specify	/: No.
DO	es filling only apply to certain territory (territories, or certain diasses. If so, speeding	
	ef description of filing. (If filing follows pting ISO Loss Costs	rates of an advisory organization, specify o	organization):
*Ad **C	ljusted to reflect all prior rate changes hange in Company's premium level w	hich will result from application of new rate	S.
		Milwaukee Casualty Insur	rance Company
		Willwaukee Casaalty Histor	Name of Company
		Howard Montgomery, Cor	mpliance Manager- Rates & Forms
			Official – Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/1/2013 (3) (2) (1) **Percent Annual Premium** Change (+ or -)** Volume (Illinois)* Coverage Automobile Liability Private **Passenger Commercial** 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass 6. Fidelity 7. Surety 8. **Boiler and Machinery** 9. Fire 10. Extended Coverage 11. Inland Marine 60.60% 46576 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revising Company LCM to 2.550 *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Milwaukee Casualty Insurance Company Name of Company Howard Montgomery, Compliance Manager- Rates & Forms

Official - Title

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
	<u>coverage</u>	Volume (minois)	<u> </u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9. 10	Fire Extended Coverage		
	Inland Marine	33324	-36.40%
	Homeowners	33324	
13.	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
Doc	os filing only onnly to cortain tarritony (f	territories) or certain classes? If so, specify:	No.
DOE	es ning only apply to certain territory (territories) of certain classes? If so, specify.	NO.
		rates of an advisory organization, specify orga	nization):
Revi	sing Company LCM to 1.010		
* ^ ~	justed to reflect all prior rate changes.		
		hich will result from application of new rates.	
	mange in Company's premium level wi	mon will result from application of their rates.	
		Security National Insurance Co	ompany
			me of Company
		Howard Montgomery, Complia	
			Official – Title

ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 10/1/2013 (3) (2) (1) Percent **Annual Premium** Change (+ or -)** Volume (Illinois)* Coverage Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass 6. **Fidelity** 7. Surety 8. **Boiler and Machinery** 9. Fire 10. Extended Coverage -47.80% 11. Inland Marine 33324 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting ISO Loss Costs *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Security National Insurance Company Name of Company

Howard Montgomery, Compliance Manager- Rates & Forms

Official - Title

Ch	Change in Company's premium or rate level produced by rate revision effective		10/1/2013	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
11. 12. 13. 14. 15.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Line of Insurance	222457 cerritories) or certain classes? If so, specify	-31.30%	
	ef description of filing. (If filing follows in pting ISO Loss Costs	rates of an advisory organization, specify o	rganization):	
	ljusted to reflect all prior rate changes hange in Company's premium level w	nich will result from application of new rate	s.	
		Wesco Insurance Compar		
			Name of Company	
		Howard Montgomery Con	npliance Manager- Rates & Forms	
		Total a monigoritory, our	Official – Title	